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ABSTRACT

This user's guide, the second of four training modules for similar benefits usage, is the result of a project of the University of Michigan Rehabilitation Research Institute in conjunction with the Virginia Department of Rehabilitative Services (DRS) model program evaluation unit to examine the issue of similar benefits in the state-federal rehabilitation program. The introduction reviews the goals and objectives of the similar benefits project and briefly describes each module. Preceding the text of the volume is a list of frequently asked questions about similar benefits presented by major topic areas. Recommendations for a definition of similar benefits, policies to implement a similar benefits program, and procedures to follow are addressed in this second volume, based on current Virginia DRS guidelines, federal legislation, and Rehabilitation Services Administration (RSA) program regulations. The appendices contain a statement from the Federal Register on similar benefits, the RSA Manual on Similar Benefits, and a reorganization of similar benefit information contained in the Virginia Client Services Manual. (Author/NRB)

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VOLUME II
Definition, Policies, and Practices

SIMILAR BENEFITS IN REHABILITATION

A User's Guide for Counselors and Administrators

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SIMILAR BENEFITS IN REHABILITATION

A User's Guide for Counselors and Administrators

VOLUME II

Definition, Policies, and Practices

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VOLUME II

TABLE OF CONTENTS

CONTENTS	PAGE
ACKNOWLEDGEMENTS	iv
PREFACE	v
INTRODUCTION	vi
FREQUENTLY ASKED QUESTIONS ABOUT SIMILAR BENEFITS	x
SIMILAR BENEFITS DEFINITION, POLICIES, AND PROCEDURES	1
Definition of Similar Benefits	1
Agency Policies for Similar Benefits	4
Procedures for Similar Benefits	6
Procedures Mandated by Legislation	8
Summary	10
APPENDIX A	11
Statement from the Federal Register on Similar Benefits	12
APPENDIX B	14
RSA Manual on Similar Benefits	15
APPENDIX C	29
Re-Organization of Similar Benefit Information Contained in the Client Services Manual	30
REFERENCES	34

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PREFACE

The UM-RRI was established in 1976, with funding from the National Institute for Handicapped Research, in response to the mandate of the Rehabilitation Act of 1973 that programs and projects be evaluated in the state-federal program. The UM-RRI efforts are directed toward research and related activities to assist states in evaluating management practices and service delivery systems.

The UM-RRI has been working on several long and short range objectives in rehabilitation program evalution to:

1. Develop alternative conceptual models that may be used as a framework for comprehensive program evaluation in the state-federal rehabilitation program

2. Conduct research on existing program evaluation instruments to determine their feasibility for current use and to determine their need for additional development and validation

3. Identify, design, test, validate, demonstrate, and disseminate program evaluation instruments, techniques, and methodologies that are consistent with conceptual models for comprehensive program evaluation in rehabilitation

4. Develop criteria for designing, developing, testing, and validating new and existing program evaluation instruments, techniques, and methodologies that consider measurement of impact, effectiveness, effort, efficiency and output

This investigation into similar benefits in rehabilitation is viewed as part of the UM-RRI's mandate in program evaluation. Feedback about this report is invited.

Ann Arbor
June 1981

Ralph M. Crystal

INTRODUCTION

The purpose of this project, undertaken by The University of Michigan Rehabilitation Research Institute (UM-RRI), in conjunction with the Virginia Department of Rehabilitative Services (DRS) model program evaluation unit, was to examine the issue of similar benefits in the state-federal rehabilitation program. The intent of the project was to (a) identify issues related to similar benefits, (b) develop training materials to assist state rehabilitation agency personnel in the use of similar benefits, and (c) develop evaluation procedures to document the impact of similar benefits on the state rehabilitation agency.

The funding for this project was through the Virginia DRS model program evaluation/management information support unit. The project was supported through the task related to the building of new evaluation capacity which can be generalized to other states. The overall model unit project is sponsored by the Rehabilitation Services Administration (RSA). The Model Evaluation Units (MEU's) were initially funded in six states by RSA in October, 1981. The objectives for the MEU's were to (a) develop a program evaluation model in state rehabilitation agencies in which comprehensive program and policy systems are linked by appropriate evaluation data; (b) field test and evaluate the effectiveness of the revised federal program evaluation Standards and the Facilities Information System for state rehabilitation agency management; (c) build new evalaation capacity which can be generalized to other states; and (d) develop linkages for a within-state agency and between-state

agency network for communication, dissemination, and utilization of evaluation topics, with special emphasis on developing and testing within the Model Evaluation Units.

Similar Benefits Project

A major goal of similar benefits is to enable the state rehabilitation agency to maintain the quality and quantity of client services, in spite of financial fluctuations and uncertainties, by obtaining services from sources other than the state rehabilitation agency to meet, in whole or in part, the cost of client services. It is anticipated that through the utilization of similar benefits, additional clients will be served. The overall goal of this project was to develop a conceptual model for utilization of similar benefits within a state rehabilitation agency. The specific objectives of the project were:

1. To help insure that resources other than the state rehabilitation agency are utilized to meet the service needs of clients
2. To identify similar benefits resources and refine the existing similar benefits directory
3. To examine the nature of interagency linkages
4. To explore the development of a system for monitoring and tracking clients who are eligible and/or receiving similar benefits
5. To develop a training program for counselors and agency administrators in the use of similar benefits
6. To implement a similar benefits system in the state rehabilitation agency

7. To document through the program evaluation process the effectiveness and impact of the similar benefits program on clients, counselors, administrators, the community, and the rehabilitation agency

As the project progressed, issues were defined and the objectives of the project modified in light of the needs of the Virginia DRS in this area. As a result of the redefinition of issues, the final product (training materials for similar benefit usage) prepared by the UM-RRI has been incorporated into four modules. Each can be used separately or in conjunction with one another. The titles of each are:

Volume I: Background, History, and Issues

Volume II: Definitions, Policies, and Procedures

Volume III: Directory, Checklist, and Reporting Systems

Volume IV: Incentives for Counselors and Administrators

The following is a brief description of each of these sections:

Volume I: Background, History and Issues

This volume provides an introduction to the nature of similar benefits in the state-federal rehabilitation program. The background and legislative history of similar benefits are presented. Issues related to the use of similar benefits are described and discussed.

Volume II: Definition, Policies, and Procedures

A working definition of similar benefits is provided in this volume. Based on federal legislation, state mandates, and other information, policies and procedures relating to similar benefits are described.

Volume III: Directory, Checklist, and Reporting Systems

This volume contains directories, checklists, and reporting systems for use in the similar benefits program. Many of these have been revised

from existing Virginia DRS documents. Explanations for each, with usage examples, are provided.

Volume IV: Incentives for Counselors and Administrators

This final volume discusses utilization incentive issues. Procedures for evaluation and monitoring, along with the description of the role of counselors and administrators in the area of similar benefits are also presented.

FREQUENTLY ASKED QUESTIONS ABOUT SIMILAR BENEFITS

The following are questions frequently asked about similar benefits. The questions are presented in major topic areas. They are not listed according to any priority or degree of improtance. Volume and page numbers are provided for readers interested in further discussion on particular questions.

	Volume	Page
Usage and Policy Questions		
1. What is the definition of similar benefits?	II	1-4
2. What types of services and resources should be considered as similar benefits?	II	2
3. Should the clients' financial ability to pay for part of their rehabilitation program count as a similar benefit?	II	3
4. Do different state interpretations of Federal guidelines for utilizing similar benefits prevent the development of consistent and standardized procedures concerning similar benefit documentation and evaluation?	II	4-5
Documentation and Data Collection Questions		
1. What are alternatives for reporting dollar cost figures of similar benefits?	III	19

	Volume	Page
2. Should similar benefit data be collected on closed or active cases?	II	6-10
3. What types of similar benefit data are needed for documentation and evaluation?	II	5
4. What forms are necessary for documenting similar benefits?	II	6-10
5. What training do counselors need for similar benefit documentation?	II	6-10
6. How are state comparisons of similar benefit utilization possible with the lack of standardized documentation and data collection?	II	4-5
Monitoring and Procedures Questions		
1. What procedures are available for counselors to monitor clients that are eligible and/or receiving similar benefits?	III	1-7, 8-23
2. What are the alternatives for reporting dollar cost figures of similar benefits?	III	19
3. What procedures are currently used for evaluating similar benefit utilization?	I	33-45
State Agency Questions		
1. How are agency funds saved through similar benefit utilization used to serve additional clients?	I	31-33

	Volume	Page
2. What are the hidden costs in similar benefit utilization?	I	42-45
3. Does the amount of money saved in similar benefit utilization justify the amount of time spent pursuing similar benefits?	I	33-45
4. Will rehabilitation funds be reduced if similar benefit utilization is successful?	IV	3-8
Counselor Questions		
1. What are the effects of similar benefit utilization on caseload management?	I	30-31, 38-39
2. What is the counselor's role in similar benefit utilization?	I	28-33
3. Does similar benefit utilization result in loss of control or inadequate feedback on clients utilizing similar benefits?	I	38
4. How effective are speciality staff in identifying and monitoring clients eligible for similar benefits?	IV	7
Client Questions		
1. Are the quality of similar benefit services equal to the services provided by VR?	I	41
2. What are potential client reactions and feelings about working with multiple agencies?	I	41-42

	Volume	Page
3. What effect can similar benefit utilization have on clients achieving their rehabilitation goals?	I	41-42
Sponsor and Legislative Questions		
1. Who pays for services when two agencies have legislation to utilize the other agency's funds before their own?	I	43-44
2. What are legislative reactions to similar benefit utilization?	IV	8-9
Cooperative Agreement Questions		
1. What type of information is necessary for effective agreements?	I	44
2. What are the responsibilities of administrators and counselors in cooperative agreements?	I	44-45
3. What type of documentation and feedback is necessary for counselors concerning outcome of similar benefit?	I	37
4. What types of conflicts exist in policies and regulations between agencies?	I	44-45
Incentive Questions		
1. Does similar benefit utilization increase the number of clients served?	IV	1-9

	Volume	Page
2. Is similar benefit utilization a cost saving benefit?	IV	1-9
Disincentive Questions		
1. Does similar benefit utilization result in service and time delays?	IV	3-6
2. Does lack of feedback to counselors concerning similar benefits affect similar benefit utilization?	IV	3-6
3. Does dimilar benefit utilization result in excessive paperwork?	IV	3-6
4. Will the rehabilitation agency lose its identity as a result of similar benefit utilization?	IV	1-9

VOLUME II

SIMILAR BENEFITS DEFINITION, POLICIES, AND PROCEDURES

Definition of Similar Benefits

A variety of definitions exist for the term "similar benefits," as used in the rehabilitation program. The definition developed by the UM-RRI was derived from several sources. It complies with the Rehabilitation Act and RSA regulation. The definition is intended to (a) clarify ambiguities concerning similar benefits and other resources, (b) define potential sources for similar benefit services, and (c) clarify the role of client financial participation and client resources in a similar benefits program.

Similar benefits as defined by the UM-RRI are "any rehabilitation services provided in fulfillment of the Individualized Written Rehabilitation Plan (IWRP) normally provided by the vocational rehabilitation agency that are obtained through, or by another agency or source to offset, in whole or in part, the cost of the rehabilitation program."

Defense for the UM-RRI Similar Benefit Definition

In both the Federal Register (please refer to Appendix A section 401.45 (b) (2)) and the Rehabilitation Services Manual (please refer to Appendix B section 2015.04 (e)) the term "similar benefits" refers

to the cost of any vocational rehabilitation service provided by programs other than vocational rehabilitation. This does not include services that are not normally provided by vocational rehabilitation but are obtained through another agency.

In terms of the reference for considering similar benefits with economic need tests, the Rehabilitation Services Manual states (please refer to Appendix B section 2015.04) "A 'Similar Benefit' is not the same as 'determination of economic need.'"

Difference Between Similar Benefits and "Other Resources"

A frequently asked question is what is the difference between a similar benefit service and an "other resource"? Similar benefit services are mandated rehabilitation services provided by another agency. "Other resources" are services provided by another agency that facilitates and benefits the client's rehabilitation program but are not services mandated and provided by the rehabilitation agency. An example of an other resource are day care services for children provided by Title XX. Day care services are not mandated by the Rehabilitation Act but can assist a rehabilitation client with children to participate in a training program or other aspect of the rehabilitation program.

Types of Services and Resources for Consideration of Similar Benefits

Similar benefit services can be obtained from public or private agencies or organizations. The services may be provided free, for a token payment, or as part of a formal cooperative agreement or grant between the rehabilitation agency and the similar benefit agency. Some major similar benefit resources are Medicaid, Medicare, CHAMPUS,

CHAMPUA, Hospital Insurance, Hill-Burton Uncompensated Care, Title XX, Veterans Administration, Welfare, and CETA. The types of similar benefit services available from these resources include: diagnosis and evaluating, goods and services, restoration, maintenance, training, services to family members, and post-secondary education.

Client Financial Participation

The client's ability to participate financially in the cost of his/her rehabilitation program is not considered a similar benefit resource. The dollar amount of client participation is established by state policy and other procedures. If the client's financial situation is above the economic need standard, the client should financially participate in the rehabilitation program. However, if the client is also eligible for similar benefit resources, these should be utilized fully.

Client Resources

Services received from other agencies or sources at the time of the client's entry into the rehabilitation program should be considered as a similar benefit if they provide a mandated rehabilitation service and if the services are necessary for the client to obtain his/her rehabilitation goal.

Another potential source of similar benefits are resources available to individual clients. An example would be private insurance coverage that would provide payment for medical or restoration services.

In Appendix C of this volume, the UM-RRI has compiled the information currently available concerning similar benefits contained in

the Virginia Client Services Manual. The UM-RRI has pulled together the various similar benefit references so that they can be presented in one place and be used for reference purposes.

Agency Policies for Similar Benefits

The basic policy of similar benefit utilization for the Virginia Department of Rehabilitative Services (DRS) is to consider alternative funding sources and services prior to spending VR funds to purchase specific client services. In principle this allows DRS to serve as many clients as possible while maintaining the quality of services. The advantage of using similar benefits is two-fold. First, similar benefit utilization should help reduce the amount of funds spent by the rehabilitation program to rehabilitate clients. In a time of diminishing resources, similar benefit utilization allows the rehabilitation agency to serve approximately the same number of clients with fewer dollars or allows the rehabilitation agency to serve additional clients for the same cost. The second advantage of similar benefits is that through the use of other services the range of services available to clients is broadened. These other similar benefit services can compliment or supplement rehabilitation services, thereby increasing the effectiveness of the rehabilitation program.

Counselors must have clients apply for similar benefit services and receive verification of ineligibility before spending vocational rehabilitation funds. Full consideration must be given to similar benefit resources depending upon the adequacy and non-interference with the achievement of each client's vocational objective. Adequacy

should be determined based on timeliness of the service, location, scope of service, and willingness of the vender. If at all possible, similar benefit consideration should take place during a client's intake into the VR program. The Similar Benefit Checklist (please refer to Volume III) should be used to identify potential similar benefit resources available to the client. These can be used for later planning on the Individualized Written Rehabilitation Plan (IWRP). Any activities or steps taken to secure similar benefit resources should be documented in the case records or as recommended in this volume.

Policy on Similar Benefits Documentation Within the State Agency

Federal legislation requires similar benefit utilization; thus VR agencies document similar benefit usage for internal as well as external purposes. Similar benefit documentation can be used as an in-house management tool to indicate how effectively the program meets established service delivery goals. Internal management information can be used for program planning, program improvement, program development, and policy analysis.

Policy on Similar Benefits Documentation Outside the Agency

Although similar documentation is done for internal purposes, it has significant external value. Consumer groups, state and federal legislators, and other program sponsors are interested in issues of compliance with regulations, accountability for monies spent, and as a mechanism for program justification to indicate the impact similar benefit utilization has on the agency and clients.

Procedures for Similar Benefits

The intent of similar benefits is to utilize other agencies' funds and services to serve VR clients. To verify consideration and utilization of similar benefits the following procedures are recommended.

Consideration of Similar Benefits

Evidence that the counselor has considered similar benefits can be determined by implementing the following procedures.

1. Identify all potential similar benefit services for which the client may be eligible on the Similar Benefit Checklist (please refer to Volume III).
2. Document contacts made with the similar benefit agency. Examples of contacts which can be documented include phone calls, letters and completed application forms.
3. Document the outcome of the contact with similar benefit agencies. If a similar benefit was received, documentation should include:
   a. Name of similar benefit agency
   b. Type of similar benefit service
   c. Date service was/will be received
   d. Amount of VR funds saved as a result of this similar benefit utilization
   e. Duration of the similar benefit service

The following are four representative examples of similar benefit documentation.

Case 1 - If a client is eligible for transportation from CETA, the documentation might be as follows:

Transportation services will be provided by CETA from April 6-17 during the client's vocational evaluation. The amount of VR funds saved as a result of this service is $25.00. Transportation services will be extended if the client enters into a training program.

If the similar benefit service was not received, documentation should include:

a. Name of similar benefit agency

b. Name of similar benefit service

c. Verification of client's ineligibility or denial of similar benefit

Case 2 - If a client receiving Social Security Disability Income (SSDI) is denied Medicare benefits, the documentation would look as follows:

Medicare benefits were applied for on March 15 at the local Social Security office. On April 10, the client was denied Medicare services because she/she has been receiving SSDI for only 16 months.

See attached form for verification.

Case 3 - If the similar benefit service was available but not used because of exceptional circumstances, documentation should include:

a. Name of similar benefit agency

b. Name of similar benefit service

c. Specific details and reasons why the similar benefit was not utilized.

Case 4 - A client is eligible for books and tools from Workers' Compensation. The training program begins in September, and Workers' Compensation cannot provide the books and tools until November. The documentation would be as follows:

> The client is eligible for books and tools from Workers' Compensation. However, funds for the books and tools will not be available until November, and the client begins training in September. Therefore, because there is a two-month delay, VR will provide the client's books and tools during the first semester.

Procedures Mandated by Legislation

The 1978 Rehabilitation Act Amendments (P.L. 95-602) mandated certain Vocational Rehabilitation services be provided only after considering similar benefit resources. These services include:

a. Physical and mental restoration services
b. Maintenance
c. Interpreter services for the deaf
d. Reader services for the blind
e. Recruitment and training services in the fields of rehabilitation, health, welfare, public safety, law enforcement, and other public services employment
f. Rehabilitation teaching services and orientation and mobility services for the blind
g. Occupational licenses, tools, equipment, and initial

stocks and supplies

h. Transportation

i. Telecommunications, sensory, and other technological aids and devices

All VR clients are expected to apply for and accept similar benefit services to which they may be entitled. If a client refuses a similar benefit he/she is eligible for, the rehabilitation agency is not required to provide that particular service. This applies when the similar benefit service is adequate and does not interfere with the rehabilitation plan (Program Instruction, RSA-PI-80-21, August 31, 1980).

To maximize similar benefit utilization, potential VR clients should apply for similar benefits during the VR applicant status (00-02) so that availability and appropriateness of similar benefit services can be determined and used in developing the rehabilitation program.

Exceptions to the Consideration of Similar Benefits

The 1978 Rehabilitation Act Amendments, (P.L. 95-602) provided exceptions to considering eligibility for certain services for clients. The following services can be provided without consideration of similar benefits:

a. Evaluation of rehabilitation potential

b. Counseling and guidance

c. Referral

d. Placement

e. Vocational and other training services (except for

training in institutions of higher education which requires utilizations of available grant assistance)

f. Related family services as are necessary

g. Post employment services

Similar benefits do not have to be utilized if it delays the attainment of the client's rehabilitation goal. If a client is eligible for a similar benefit training program but has to wait for nine months before beginning the program, VR could use its case service funds to provide the program, assuming the client could begin the program sooner than nine months. However, if a client is eligible for a specific similar benefit that will result in a delay of services, the counselor should arrange the service and pay for it with VR funds, but immediately switch over to the similar benefit funds or service as soon as they become available.

Summary

Recommendations for a definition of similar benefits, policies to implement a similar benefits program, and procedures to follow have been addressed. The recommendations were based on current Virginia DRS guidelines, federal legislation and RSA program regulations. Volume III contains suggestions that will facilitate putting into practice the issues presented.

Appendix A

Statement From the Federal Register

on Similar Benefits

Federal Register Section 401.45 (b) (1)

(b) Consideration of similar benefits

(1) The State plan shall provide that, in all cases, the State agency will give full consideration to any similar benefits available to a handicapped individual under any other program to meet, in whole or in part, the cost of any vocational rehabilitation services provided to such a handicapped individual, except the following:

(i) Evaluation, of rehabilitation potential except as provided under paragraph (b) (4) of this section;

(ii) Counseling, guidance and referral;

(iii) Vocational and other training services, including personal and vocational adjustment training, books, tools, and other training materials, except for training or training services in institutions of higher education under Section 401.73 (c);

(iv) Services to members of a handicapped individual's family;

(v) Placement; and

(vi) Post-employment services necessary to assist handicapped individuals to maintain suitable employment;

(2) The State plan shall provide that the State agency will give full consideration to any similar benefit available under any other program to a handicapped individual to meet, in whole or in part, the cost of physical and mental restoration services and maintenance provided to such a handicapped individual except where such consideration

would significantly delay the provision of such services to an individual;

(3) The State plan shall provide that when, and to the extent that, an individual is eligible for such similar benefits, such benefits will be utilized insofar as they are adequate, and do not interfere with achieving the rehabilitation objective of the individual.

(4) The State plan shall further provide that the State agency will give full consideration to any similar benefits available to a handicapped individual being provided an extended evaluation of rehabilitation potential under Section 401.36 in a manner consistent with paragraphs (b) (1) through (b) (3) of this section.

Appendix B

RSA Manual on Similar Benefits

2015.01 Legal Basis

Rehabilitation Act of 1973 (Public Law 93-112) as amended, Sections 101(a)(8), 101(a)(12), and 103, Code of Federal Regulations, Chapter IV of Title 45, Sections 401.38, 401.39, 401.45, and 401.71.

2015.02 Purpose of Consideration of Similar Benefits

The major purpose of the similar benefits provision is to provide vocational rehabilitation agencies with an organized method for assessing the eligibility of handicapped individuals for benefits under other programs and then drawing upon the other programs to provide rehabilitation services. Vocational rehabilitation services which must include a similar benefit review are specified in the Act. Other restrictions are provided in the Act: (1) an exception to the similar benefits review if it would cause significant delay in the provision of physical and mental restoration services or maintenance services; (2) expenditures for training services in institutions of higher education can be made with vocational rehabilitation funds only after maximum efforts have been made to obtain grant assistance from other sources. States may establish policies for similar benefits review for services which under Federal regulations do not require reviews.

2015.03 Background

The phrase "similar benefits" has been in the Rehabilitation Act since 1943. The Rehabilitation Act of 1973, however, is more inclusive in its listing of services affected by the provision. The services affected by the similar benefits provision are found in Sections 103(a)(4) through 103(a)(11). They include:

- physical and mental restoration services
- maintenance
- interpreter and reader services
- recruitment and training services for handicapped individuals in new fields of employment
- rehabilitation teaching services and orientation/mobility services for the blind
- occupational licenses, tools, equipment, and initial stocks and supplies
- transportation in connection with rehabilitation services
- telecommunication, sensory, and other technological aids and devices

. restorative post-employment service

Similar benefits should also be used whenever possible in providing for groups of individuals. Services to members of a handicapped individual's family do not require mandatory similar benefits review, but States are encouraged to devise procedures for such reviews. See Chapter 1539.00, Services to Family Members, and Chapter 1543.00, Post-Employment Services, for discussion of the use of similar benefits for these specific services.

2015.04 Terminology

Definitions in the Rehabilitation Act of 1973 as amended and in Regulations promulgated under the Act do not address many of the terms and phrases relating to similar benefits. Additional working definitions are needed for use in guidelines. The following working definitions are suggested for State use in training and manuals:

(a) "eligibility" - legally qualified, as in an entitlement or in meeting the criteria for obtaining services. This term should also be interpreted in terms of suitability, that is eligibility alone should not be emphasized if the resources are beyond the claim of the handicapped individual due to other contingencies (priorities for services, funding, etc.).

(b) "full consideration" - to give careful thought or attention, to take into account, as in reviewing facts in a case record in accordance with an established check-list or procedure.

(c) "maximum efforts" - a specific method or action to achieve a particular benefit to pay for a specified rehabilitation service; may consist of a set agency policy or process which may be applied in appropriate cases. For example, the State Agency could have a cooperative agreement with State university officials for financial assistance officers to interview and evaluate the financial need of all DVR support students.

(d) "program" - an organized, ongoing form of service or assistance, whether public or private, free or requiring a deductible, co-insurance feature, token payment, or personal claim.

(e) "similar benefits" - any appropriate service or financial assistance available to a handicapped individual

from a program other than vocational rehabilitation to meet, in whole or in part, the cost of vocational rehabilitation services to be provided under an individualized written rehabilitation program for such a handicapped individual.

(f) "institution of higher education" - colleges, community/junior colleges. The regulations do not mandate reviews of grant assistance for business schools, nursing schools, etc., but States are encouraged to do so.

In the educational area, particularly, there is a standardization of terminology for student financial assistance. State VR agencies may find it appropriate to adopt for use in their manuals, guides, and instructions the standardized terms used by the U.S. Office of Education, and the national clearinghouses for financial assistance (e.g., American College Testing Program, College Scholarship Service). Also, the Yearbook of Higher Education (Marquis Academic Media: 200 East Ohio, Chicago, Illinois 60611) is published annually and contains a Glossary of Terms in Higher Education and other useful reference materials.

A "Similar Benefit" is not the same as "determination of economic need." In determination of economic need, the objective of a State policy is to set the conditions and limitations on the participation of individuals in the cost of their rehabilitation. In the area of similar benefits, the objective is to systematically determine eligibility of individuals to obtain appropriate rehabilitation services from agencies other than vocational rehabilitation.

2015.05 Service Delay

Similar benefits are to be utilized in all cases to the extent that they are adequate, timely, and do not interfere with achieving the rehabilitation objective of the individual. In the areas of physical and mental restoration and maintenance, special attention must assure that similar benefits reviews do not delay the provisions of services, resulting in discomfort or hardship for any individual. This provision is in Section 101(a)(8) of the Rehabilitation Act of 1973 as amended.

State Agency Guidelines should assure that similar benefits are appropriate in all cases, and that no hardships occur in medical services or maintenance. The Individualized Written Rehabilitation Program (IWRP) provides a basis for counselor-client agreement on the adequacy, timing, and hardship-discomfort

factors in the use of similar benefits, particularly for medical and maintenance services. The IWRP's schedule for services will identify individual eligibility for similar benefits and the extent, if any, of client participation in the cost of services. States should identify similar benefit factors on a Statewide basis which tend or have been found to result in service hardships or delays (see Chapter 1507 - Individualized Written Rehabilitation Program). Where individual eligibility is not present for a similar benefit, but the potential of eligibility is high, reasonable judgment of the counselor would be the rule. Counselors would be advised to inform clients of their potential eligibility, and, to assist them in obtaining eligibility for such benefits.

2015.06 Establishing the Agency Similar Benefit Policy

The following review questions are presented as a guide for identifying current agency procedures related to the utilization of similar benefits.

- Does the State Agency have a policy directive which "ties together" the similar benefits area in a comprehensive way?

- If no comprehensive State Policy directive or manual exists, are similar benefits given specific attention as an aspect of case services planning? How?

- In case services planning, are the following similar benefits procedures a matter of State agency practice?

- Checklists or forms which help counselors review client eligibility for insurance, workmen's compensation, Veteran's benefits, Medicare, Medicaid, Educational grants, etc.

- Authorization requirements or consultation approvals for high-cost services which include reviews for possible similar benefits (e.g., major physical restoration services, certain tuition items, major telecommunications equipment, etc.).

- Accounting procedures which itemize similar benefits payments to avoid possible mis-billing to case service accounts.

- Orientation and training programs to alert counselors to similar benefits.

- Have agency or outside audits or program reviews presented recommendations on similar benefits and the adequacy of State agency policies and procedures?

- Are cooperative agreements with other State agencies and public and private agencies utilized and kept current so as to provide clear directions in delineating roles and responsibilities for services among VR and other programs serving the same client?

Each of the above questions deserves additional elaboration. While the remainder of this Chapter will provide some help, each State should consider assigning overall responsibility for similar benefits procedures to a high level manager at the central office of the agency.

2015.20 Overview on Similar Benefits for the Provision of Restorative Services

Restorative rehabilitation services require special similar benefits attention. Subject to the qualifications noted above (section 2015.05) on service delay, all VR medical restorative services should be subject to similar benefits review. The State agency should focus on potential payment sources for medical services (public programs, insurance) and on counselor casework procedures (information in the case service plan, approval by medical consultants or supervisors, etc.).

2015.21 Sources of Medical Similar Benefits

States should prepare inventories for counselors which organize available information about medical similar benefits. Major programs and providers should be identified. Other questions to be answered would be:

. What type of benefit does the program provide?

. What is the short method of determining eligibility?

. What facilitating arrangements might the VR agency have for considering this benefit?

. What highlight characteristics of clients served to identify potential applicability?

. Will the benefit provide the desired quality of service?

The attached Table, "Sources of Medical Similar Benefits for Vocational Rehabilitation Services," shows how programs and providers might be inventoried.

Some States have had success with a composite list of State/local resources which have been utilized to meet special needs. A model list would identify the resource, and would touch upon the type of benefit, characteristics of clients who might benefit, rehabilitation services which might be covered, and facilitating arrangements of the State agency in obtaining the resources.

In the utilization of State/local resources, each State will have different experiences. No single national list could identify all unique State/local resources. Agencies will often find that an investment of medical consultation time in identifying resources and how to utilize them will return dividends in case monies saved. States are cautioned against permitting public and philanthropic agencies to "change" VR clients who would otherwise be eligible for a free or reduced cost service. Cooperative agreements can often be written to forestall such practices and prevent abuses.

2015.22 Medical Assistance Payments - Medicaid Title XIX

Title XIX should always be investigated first as the primary resource for physical and medical restoration needs. Every State should have a cooperative agreement between the Rehabilitation and Welfare agencies. Interagency agreements must be worked out State by State because the scope and amount of services under the Medicaid program in each State varies widely as do the groups of persons who are eligible to receive assistance under Title XIX. Official HEW policy, as set forth in a communication to all States April 6, 1971, and restated in Title XIX Program Regulation Guidelines of May 13, 1974 (MSA-PRG-30) is as follows:

> EACH STATE IS URGED TO PURSUE AGGRESSIVELY COOPERATIVE ARRANGEMENTS WHICH ALLOW FOR THE USE OF TITLE XIX MONEY FOR MEDICAL SERVICES WHENEVER NECESSARY DURING THE REHABILITATION PLAN.

Previous guidelines on this subject have identified the following activities as methods of strenthening and itensifying Title XIX-VR working relationships: (1) assigning specific responsibilities to staff members of respective agencies; (2) establishment of procedures for authorizing services; and (3) confirming and updating arrangements for utilizing Title XIX funds.

The case record should carefully document any exceptions to utilization of Title XIX in providing major medical services to welfare eligible VR clients.

2015.23 Public Health Insurance - Medicare Title XVIII

Unlike Medicaid, which is a medical assistance payments program, Medicare is an insurance program providing benefits to certain entitled individuals who have enrolled. It is administered by the Social Security Administration.

Pamphlets are readily available from the Social Security Administration which outline the various eligibility factors and benefits available through Medicare. VR agencies should assure that all counselors and supervisory personnel know the basic facts of Medicare as a resource for payment of physical restoration and medical case services provided by vocational rehabilitation. For services provided under an Individualized Written Rehabilitation Program, the State Agency can pay the 20% co-insurance amount required by Part B of Medicare.

As unmarried persons disabled before age 22 who continue to be disabled can become eligible for medicare benefits based on the death or Social Security beneficiary status of a parent, State agencies should note the potential eligibility of many congenitally handicapped persons in institutions and special medical programs.

2015.24 Other Individual and Group Insurance

Insurance benefits should be applied to the cost of physical restoration and medical care services, and vocational rehabilitation participation limited to coverage of excess not covered by those benefits. Clients may object to making insurance claims, and to assumption of co-insurance costs of deductibles. Counselors should be prepared to explain the similar benefits provisions of the Rehabilitation Act and the State agency policy concerning participation by the individual in the cost of rehabilitation services. Supervisory procedures should address problems in using insurance benefits by vocational rehabilitation.

States should use cooperative agreements and operating procedures for improving the utilization of major insurance programs in their jurisdiction. A national set of guidelines cannot summarize and indicate the strengths and weaknesses of the many forms of health insurance benefits available in the nation. These vary from State to State and region to region. In the

vicinity of a military base, insurance for dependents of military personnel may be a major resource. In a high impact Federal Employment area, the various Government-wide health insurance programs would be a resource. In certain States (and localities within States) specific union or employer health programs would dominate entire industries. Also, VR agencies should contact State Insurance Departments, many of which can provide information on recent decisions in insurance coverage relevant to the State VR agency.

2015.25 Medical Consultants and Medical Social Workers

Some States have established special positions for the sole purpose of facilitating the utilization of similar benefits and improving the quality of VR physical restoration services provided under other agency or program auspices. Such a position would be filled by a person with considerable background in medical care utilization, and familiarity with the vocational rehabilitation process. Duties would include training counselors and supervisors, acting as liaison with other programs, preparing instructional materials, and assisting in case reviews to determine agency effectiveness. States may well discover that personnel trained and placed to perform such duties could more than return the cost of their salaries to the State in case service savings.

2015.40 Overview on Similar Benefits for Services in Institutions of Higher Education

The higher education area is a legislatively mandated area where maximum efforts must be made to secure grant assistance, in whole or in part, from other sources to help pay for the cost of services. In the past under the Vocational Rehabilitation Act, the similar benefits provision did not apply to training services. The Education Amendments of 1972, however, established a new program of Basic Educational Opportunity grants under which any college student in good standing is entitled to apply for a basic assistance grant. The intent of the similar benefits provision for higher education in the Rehabilitation Act of 1973 is to assure that vocational rehabilitation agencies make maximum efforts to have their clients secure Basic Educational Opportunity Grants (Basic Grants) that they may be entitled to prior award of vocational rehabilitation assistance for higher education costs.

Since the Basic Grants program is the only Federal entitlement program of its kind, it is the only grant program which vocational rehabilitation agencies can be required to make maximum

utilization of under provisions of Section 103(a)(4) of the Rehabilitation Act. States are encouraged, however, to institute casework procedures and agency policies to evaluate each case where higher education services are necessary.

Since the Basic Grants definition of post-secondary education is more inclusive than the VR use of higher education institutions, States are urged to establish policies not mandated by Federal regulations to identify grant assistance for business schools, training programs, and other VR utilized post-secondary institutions.

In short, the Federal law requires that the Basic Grants program be only considered for colleges, universities and junior colleges, but a total State policy for equitable and prudent use of higher educational assistance would call for standard casework procedures and policies written to conform with circumstances in the particular State.

2015.41 Basic Education Opportunity Grants

Basic Educational Opportunity Grants are Federally administered. Basic grants are intended to be the "floor" of a financial aid package and may be combined with other forms of aid in order to meet the full costs of education. The amount of the basic grant is determined on the basis of the individual's and his family's financial resources. In determining individual and family resources, Basic Grants regulations do not consider vocational rehabilitation assistance as income.

Individuals have personal responsibility for making application for determination of their Basic Grant Eligibility for the academic year. Applications are distributed to high schools, colleges, counseling centers, Federal Offices, State agencies, and directly to individuals who respond to media advertisements sponsored by Basic Grants. The process is as follows:

- An individual completes an application and sends it in its special envelope directly to Basic Grants for a determination of his eligibility free of charge;

- Within four weeks the student receives a Student Eligibility Report (SER) which will indicate the result of the application;

- The Student Eligibility Report (SER) is then submitted by the student to the Student Financial Aid Office at the institution in which the student plans to enroll where the amount of the Basic Grant is calculated.

It is in the best interest of the State vocational rehabilitation agency to establish direct contact with each institution of higher education in the State, and with the State association of financial aid administrators to facilitate the exchange of information in the determination of financial assistance to students from Basic Grants, institutions, and vocational rehabilitation.

Some States have established cooperative agreements whereby it is assured that each client is an applicant at the financial aid office at the campus he is attending. Vocational rehabilitation counselors then channel communications concerning financial aid to the campus financial aid office, and in accordance with substantive components of the agreement relating to VR and college aid, the amount of assistance is calculated. Such an arrangement can be expanded to include a role for a campus office for handicapped people, VR counselors on campus, and other arrangements related to total on-campus needs of handicapped individuals. Since college costs can include multiple services such as maintenance, attendents, medical services, reader services, interpreting, and so forth, arrangements made for facilitating consideration of similar benefits may be a vital link to other needs. Information on state financial aid associations can be obtained from the National Association of Student Financial Aid Administrators, 910 Seventeenth St., N.W., Suite 228, Washington, DC 20006.

2015.42 Special National Education Institutions - Gallaudet & NTID

Gallaudet College and the National Technical Institute for the Deaf are special national educational institutions which have a unique status as Federally-aided corporations. These institutions serve large numbers of deaf students who are supported in whole or in part by vocational rehabilitation agencies. Each State agency however, establishes its own policies for financial assistance to students attending the institutions, including incidentals such as travel to and from school. It is particularly important that State agencies cooperate with financial aid officials of Gallaudet and NTID so that equitable policies on a National and State basis result for all vocational rehabilitation assisted clients attending the institutions.

RSA and Gallaudet/NTID jointly issue periodic guidelines for financial assistance to students under VR sponsorship at the institutions. Special attention should be given to communication between Gallaudet/NTID, RSA, and State coordinators for services to the deaf in VR agencies. It should be through the State coordinator for services to the deaf that similar benefits for services at these institutions are identifed, that the Basic

Grants program is coordinated, and that problems are resolved relating to costs of services.

2015.43 Loan Programs

Federal Regulations do not require vocational rehabilitation agencies to consider loan programs as a substitute in whole or in part for rehabilitation assistance. States should develop policies for determining circumstances under which vocational rehabilitation clients will be encouraged to utilize educational loans:

- States may establish policies relating to the participation of individuals in the costs of rehabilitation, and under such policies State VR assistance may be limited for individuals above a specified income level;

- Certain higher education services may not be covered in whole or in part by the State agency, for example Graduate School, or tuition at non-resident states, or tuition above and beyond the level at the State University;

- Fiscal pressures may limit the amount of funds available to the State agency for higher education services, forcing the State agency to turn to any available scholarships and loans.

In determining policies on loans, States are urged to consider the ongoing high living costs of persons with severe disabilities, and the prospects that clients may not gain employment after college is completed at earning levels sufficient to easily amortize a loan. Where possible, loans should be sought that include a forgiveness clause. Since loan programs vary significantly, vocational rehabilitation agencies would be best advised to turn to State financial aid administrators associations for help in establishing policies relating to loans.

2015.60 Overview on Consideration of Similar Benefits for Other VR Services

The Rehabilitation Act of 1973 added a number of services to the list of services for which similar benefits must be reviewed. Several of these services are new to the Act, including specific listing of rehabilitation teaching services and orientation and mobility services for the blind, and telecommunications, sensory, and other technological aids and devices. For most of these services no other major Federal or State program provides ongoing assistance for the service such as vocational rehabilitation

provides under the IWRP. In some instances, and in some States, public or private programs are available which would constitute a similar benefit. Future guidelines may be able to provide suggestions for specific services. The following is an outline of manual sections which will be completed as information on similar benefits for the services becomes available. These sections will require extensive cross-references to manual chapters on the specific services for which similar benefits are to be considered.

2015.61 Recruitment & Training Services: Public Service Employment Opportunities. (cr - Manual Section 1537.00)

2015.62 Licenses, Tools, and Equipment, Initial Stocks, Supplies. (cr - Manual Section 1545.00)

2015.63 Maintenance. (cr - Manual Section 1527.00)

2015.64 Transportation. (cr - Manual Section 1529.00)

2015.65 Interpreter Services for the Deaf. (cr - Manual Section 1531.00)

2015.66 Reader, Teaching, Orientation, and Mobility Services. (cr - Manual Section 1533.00)

2015.67 Telecommunication, Sensory, and Other Aids and Devices. (cr - Manual Section 1535.00)

2015.80 Cooperative Arrangements. (see Manual Chapter 530 - Cooperation with other Agencies)

Cooperative arrangements with other State agencies and with other public and private programs can be major instruments for maximizing utilization of similar benefits. A cooperative agreement can provide the following advantages:

- a formal statement of the responsibilities of the VR agency and other programs, listing conditions of eligibility, referral, joint provision of services, and other administrative elements;

- a model for programs in other States to follow, and a planning base for future program and policy changes within the State based on services provided under the terms of the agreement;

- a means of circumventing restrictive eligibility practices (first dollar - last dollar) which limit services to individuals;

Cooperative arrangements also help to demonstrate State compliance with the mandate that similar benefits be considered in the provision of rehabilitation services.

2015.90 Program Evaluation of Similar Benefits. (see Manual Chapter 535, State Agency Studies and Evaluation)

State practices for utilization of similar benefits should be subject to periodic evaluation. Since this area involves substantial administrative and direct service costs, State agencies should devote a substantial portion of their evaluation effort to measuring performance and effectiveness at the service delivery level. This is also an area for evaluation under the General Standards for Evaluation issued by HEW. RSA will be issuing periodic instructions on how to evaluate and report on utilization of similar benefits. In evaluation States should utilize program administrative reviews and other methods for case reviews. As the Individualized Written Rehabilitation Program will include data relating to similar benefits, Program Administrative Reviews should provide an excellent method for evaluation of actual performance.

States are encouraged to share information with RSA and other States concerning methodology for evaluating program performance in utilization of similar benefits.

Sources of Medical Similar Benefits for Vocational Rehabilitation

Program/Provider	Type of Benefit	Short Method of Determining eligibility	Facilitating Administrative arrangement	Highlight characteristic for applicability	VR Medical services covered (cross-references)
Title XIX "Medicaid"	State-Federal Medical Assistance Program for the medically needy	Does client have a medicaid card?	Cooperative Agreement between VR Agency and State Title XIX Program	Welfare Recipients	Physician's Services Hospital & Clinic Services Dental, Visual, Hearing Services Medical care for acute conditions
Title XVIII "Medicare"	Publicly Administered Medical Insurance	Does client have a medicare care?	VR can pay 20% deductible costs and client premiums if necessary	-SSDI recipients for 2 years or more -Age over 65 -Persons disabled before age 22 under certain conditions	Physician's Services Hospital & Clinic Services Dental, Visual, Hearing Services Medical care for acute conditions Renal Dialysis and Kidney transplants
Individual or Group Health Insurance (e.g. - Blue Cross, Blue Shield)	Privately Administered Insurance	Does client have a current eligibility card (or is client eligible under parent or spouse)	Cooperative Agreement of VR with group health care centers	-Employed Individuals -Dependents (e.g. spouse, child) -Dependent of military Personnel	Physician's Services Hospital & Clinic Services Dental, Visual, Hearing Services, depending upon the plan
Workmen's Compensation Insurance	Work Injury Insurance with Public Administration of claims	Is client being assisted by State compensation Program?	Cooperative Agreement of State compensation unit and VR Agency	Job related Disability	Medical care and VR, sometimes subject to limits on duration, total expenditure, and/or type of medical service provided
Community mental health services	Mental illness services and intervention	Does client reside in mental health center service area?	Cooperative Agreement between VR and mental health center	Behavior or adjustment problems	Therapy, group sessions, services to family members and other mental health services

Sources of Medical Similar Benefits for Vocational Rehabilitation

Program/Providers	Type of Benefit	Short Method of determining Eligibility	Facilitating Administrative Arrangement	Highlight Characteristic for Applicability	VR Medical Services covered (Cross-reference)
Individual Life, Automobile, Home or Comprehensive Liability Insurance (including no-fault)	Privately administered Insurance	Is Client covered under policy in force?	Cooperative Agreement of Insurance Company and VR Agency	Accident related	Mecical rehabilitation
Veteran's Administration	Federal Direct Assistance Programs, Hospitals and rehabilitation centers	Is client a veteran	RSA-VA cooperative agreement at Federal level; DVR-VA Regional Office agreement at State level; Exchange of information, publications manuals and instructions	Disabled veterans; veterans who have medical records where reciprocal sharing of information is indicated	Referral to VA for services covered by VA where there is different coverage for services connected vs. non-service connected disability
Crippled children's services	Federal assistance programs to States for medical and related services to crippled children	Is client under 21 years of age, crippled or suffering from conditions that lead to crippling?	Cooperative Agreement between VR agency and State Title V Social Security program	Client under age 21-referrals from schools, youth clinics, especially children with multiple handicaps, congential heart disease	Medical, surgical, corrective, and other.

Appendix C

Re-Organization of Similar Benefit Information Contained in the Client Services Manual

Information in this Appendix has been compiled from various sections of the Virginia Client Services Manual. The UM-RRI recommends this Similar Benefit information be placed on page 63, 10-4, "Determination of Responsibility of Program Cost." This can be done whether or not the other recommendations of the UM-RRI are utilized.

A. Similar Benefits

Similar benefits refer to appropriate services or financial assistance from other than DVR, specifically provided to meet in whole or in part the cost of vocational rehabilitation services. Criteria are on the Record of Similar Benefits RS-4e(2).

Similar benefits must be sought and used in each case prior to expending case funds. The counselor's efforts and results are recorded on the Continuation Sheet VR-4-0. The amount and source of similar benefits are recorded on the Individualized Written Rehabilitation Plan VR-5, the Financial Statement VR-13, and the Similar Benefit Record RS-4e(2).

B. The Counselor's Role

The counselor is responsible for making a determination as to how a program of services is to be financed. The counselor is expected to be innovative as a plan for financing a program is formulated. The counselor should consider the availability of other resources to cover part or all of the cost; the availability of the individual's resources or the individual's family resources to cover part or all of the cost; and the availability of department resources to cover part or all of the cost when other resources are insufficient.

1. Availability of Other Resources

The counselor will make an assessment of the availability of other resources to cover, in whole or in part, program costs. Results of this assessment should be recorded on the Continuation Sheet (VR-4-0).

Similar benefits must be used, and the financial benefits recorded on the VR-4e(2). (See the reverse side of the RS-4e(2) for instructions.) Among other resources that may be considered are:

a. Social Security Disability Insurance Income and Supplemental Security Income
b. Hospital and physician service plans and/or hospital insurance
c. Medicaid and Medicare
d. Veterans benefits
e. Federal grants and loans
f. State grants and loans
g. Public and private scholarships
h. Individual or community organization grants or loans
i. Workmen's Compensation and private insurance
j. Crippled Children's Bureau - Department of Health (clients under 21 years of age)

2. Availability of Individual or Family Resources

The counselor will use the Financial Statement (RS-13) to determine the availability of the individual's resources or the individual's family resources to cover all or part of the cost of the program of services. This form also assists in the identification of other resources that may be available to cover all or part of the program cost. The form, when completed, may indicate that the individual or his family possesses assets to contribute in a signifi-

cant way to meeting program costs. (Directions for completion of the Financial Statement (RS-13) are included in Chapter VIII.)

a. When economic need does not exist, per department criteria, but circumstances exist that would cause hardship to an individual or family by assuming a portion of the cost for a program of services, an exception to the economic need test may be requested by the counselor. The request is made to the local supervisor. The counselor will discuss with the supervisor reasons for requesting the exception. A financial plan developed with the individual or the individual's family and recorded on the Financial Statement (RS-13), reflecting what the individual or family of the individual can assume, will be submitted to the supervisor. Approval of the financial plan will constitute an exception to the department's economic need criteria.

3. Other Criteria

The following criteria apply to the availability of department resources in the provision of services:

a. Services provided without consideration of economic need:

(1) Evaluation, diagnostic and related services, including maintenance and transportation as needed. This includes services provided in Extended Evaluation, as well as diagnostic services provided in a service status.

(2) Counseling and guidance services

(3) Job placement and follow up services

b. Individuals receiving the following benefits are considered to be eligible for use of department funds without documentation of economic need: SSDI beneficiaries and SSI recipients who meet the Special Selection Criteria; Public Assistance recipients (this includes public welfare, individuals at state correctional institutions, and state mental hospitals).

Services provided to recipients of these funds should be supplemental and not a duplication of services.

c. The financial status of the individual or individual's family must be reviewed annually, or when family circumstances change due to death of a family member, marriage of the individual, etc. A new Financial Statement (RS-13) will be completed with adjustments made as to cost responsibility relating to the change in circumstances.

Please refer to pages 106-107 and 191 section 31-192 of the Client Services Manual for procedures on similar benefit documentation.

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